BREACH

BELGIAN RESEARCH AIDS&HIV CONSORTIUM

# Best Poster Contest

**11 Posters**

- 3 Basic Science
- 6 Clinical Science
- 2 Public Health

# BEST POSTER

## Basic Science

**“TOWARDS A FUNCTIONAL CURE FOR HIV-1 INFECTION : BRD4 MODULATOR ZL0580 AND LEDGINS ADDITIVELY BLOCK AND LOCK HIV-1 TRANSCRIPTION ”**

**Eline Pellaers**, Alexe Denis, Wout Hannes, Anayat Bhat, Julie Janssens, Zhang Peng, Zeger Debyser

**12th BREACH SYMPOSIUM**

**November 28th, 2024, Palais des Académies, Brussels**

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# BEST POSTER

## Clinical Science

**“RUMBA’S WEEK 144 RESULTS CONFIRM REASSURING METABOLIC OUTCOMES IN BOTH DTG/3TC AND B/FTC/TAF ”**

**Sophie Degroote**, Evy Blomme, Liesbeth Delesie, Linos Vandekerckhove, Marie-Angélique De Scheerder

**12th BREACH SYMPOSIUM**

**November 28th, 2024, Palais des Académies, Brussels**

# SOCIAL AND SEXUAL NETWORKS OF NEWLY DIAGNOSED PEOPLE LIVING WITH HIV

## A QUALITATIVE SOCIAL NETWORK ANALYSIS

Landeghem Ella*, Vanden Bulcke Charlotte*, Rotsaert Anke, Deblonde Jessika, Verhofstede Chris & Nöstlinger Christiana

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## INTRODUCTION

Despite the availability of a range of effective HIV prevention tools, new HIV acquisition continue to occur mainly in minority populations. Therefore, we need to better understand the role of the environmental and social context in how these new HIV acquisitions happen. Qualitative social network analysis is an approach to explore how people's social and sexual may influence HIV acquisition and prevention behaviors.

## OBJECTIVE

- To describe social and sexual networks (SSN) among people newly diagnosed with HIV
- To understand the influence of SSN on preventive and risk behavior
- To describe perceptions on how participants acquired HIV

## METHODOLOGY

Design
- Qualitative sub-study of COLIBRI s… (Connecting Laboratory Information w… Behaviour for Recent and Advanced Infection) (Vanden Bulcke et al., 2024)
- Ego-centric social network approach
- In-depth interviews
- Constructing of sociograms of social and sexual networks

Participants
- N=20 participants who were newly diagnosed with HIV and currently in follow-up … Ghent University Hospital
- n=13 identified as gay MSM (gMSM); n=2 as heterosexual men who have sex with women (hMSW); n=1 as a heterosexual men who only has sex with men (hMSM); n=1 as heterosexual woman who has sex with men (hWSM); n=3 as bisexual men who only have sex with men (bMSM)

Analysis
- Descriptive analysis of sociogram structure
- Reflexive thematic analysis of interview data

## RESULTS/FINDINGS

- Friends, family members, regular sex partners and HIV physicians were placed closest to the ego (=the participant) on the sociogram.
- **Self-identified gay men** did not consider their **casual sex partners** as emotionally close enough to be included in the sociogram, even though these partners were often participants' **primary source** of information about sexual health
- HIV … was often … to **increased sexual risk-taking** under **influen… of drugs**
- **Hete… and bi…** men who … sex with m… MSM … more … (we…
- … not consider themselves **at ri… for HIV**
- … among gay-identified M… than amo… heterosexu… and …, p… attributed to **community-bas… prevention** …
- Most participants only **disclosed** HIV to those closest to them, and the … and p… lack of **social support** influenced HIV acceptance.
- Feelings of **internalized HIV stigma** and **homophobia** prevented HIV disclosure, especially among heterosexuals and heterosexual and bisexual MSM.

*"There was HIV and … but not with us [heterosexuals], a distant matter. Kind of nonchalant thinking that it would happen to me."* (…SM)

*"Social pressure might be a bit of a heavy term, but it was almost normal that when we went out, drugs would be used. (…) I felt that it made me less likely to say 'no' when I would have said 'no' if I hadn't been under the influence. Under influence, I didn't say it as quickly. Not because others encouraged me, but because of the influence of those drugs." (gMSM)*

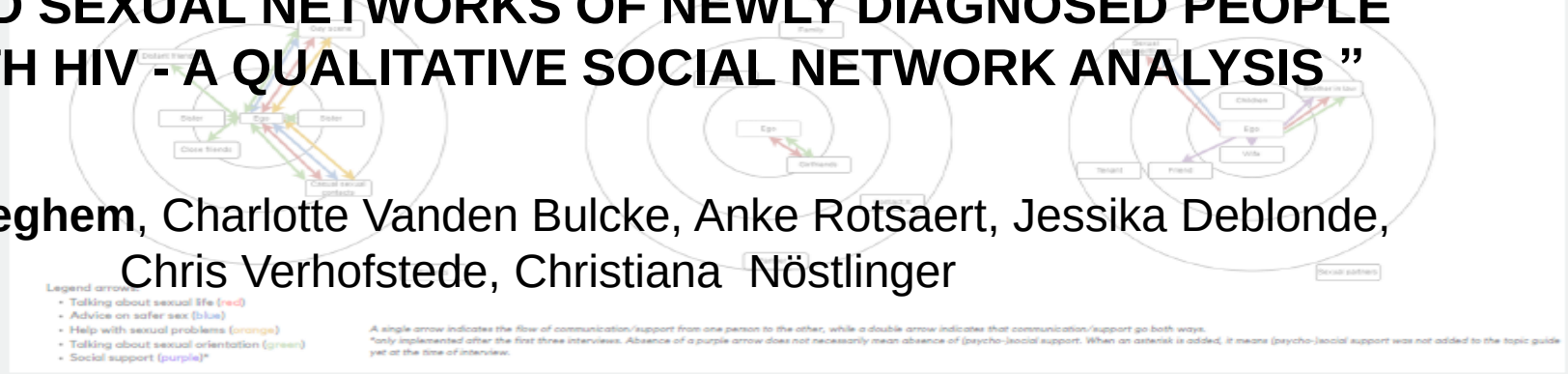
*"The diagnosis … It was … clear to me who I wanted to inform. The people I felt … or … needed to know because it's the people I am close to … spend time with" (gMSM*

*"… besides … few … no one … about my HIV because I am also afraid to be confronted … I am not a person like in the clichés of unsafe behavior and decadence etc. I like to go out and dance. I also took drugs, xtc, coke and alcohol from time to time, but never to the extent that I led a normless life, quite the contrary. No, the problem is that if I tell my friends or family that I am HIV positive than I will be stigmatized as gay. I am not gay because I do not like men, I only have sex with men" (hMSM)*

## SOCIOGRAMS

Examples of pseudonimized and digitalized visualisations of sociograms constructed during the in-depth interviews

Homosexual MSM | Heterosexual woman | Heterosexual MSM



Legend arrows:
- Talking about sexual life (red)
- Advice on safer sex (blue)
- Help with sexual problems (orange)
- Talking about sexual orientation (green)
- Social support (purple)*

A single arrow indicates the flow of communication/support from one person to the other, while a double arrow indicates that communication/support go both ways.
*only implemented after the first three interviews. Absence of a purple arrow does not necessarily mean absence of (psycho-)social support. When an asterisk is added, it means (psycho-)social support was not added to the topic guide yet at the time of interview.

## CONCLUSION

- Important **differences** between **self-identified gay** and **bisexual identified MSM** influencing sexual risk taking and prevention behavior
- Future prevention initiatives … should … e who do not identify as the established transmission groups
- Awareness of biomedical prevention should be raised in the general population, providing a base on which more tailored promotion can be built.
- Involving **family physicians** and **social caseworking** people living with HIV may help to **decrease** (**anticipated**) **HIV stigma**.
- … should … low … ip in… eir sexual health risks

References:
Vanden Bulcke, C., Deblonde, J., Necasi, C., Van Praet, J., Van Cutsem, E., Mertens, L., … & Verhofstede, C. (2024). Profile of Persons Recently Infected with HIV-1 in Belgium: New Insights to Tailor Prevention Efforts. AIDS and Behavior, 1-12.

*shared first authorship

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# BEST POSTER

## Public Health

## "SOCIAL AND SEXUAL NETWORKS OF NEWLY DIAGNOSED PEOPLE LIVING WITH HIV - A QUALITATIVE SOCIAL NETWORK ANALYSIS "

**Ella Van Landeghem**, Charlotte Vanden Bulcke, Anke Rotsaert, Jessika Deblonde, Chris Verhofstede, Christiana Nöstlinger

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